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I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON THE DATE INDICATED BELOW.



BY:

John Ballup

Date:

April 28, 2005

MAIL STOP RCE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:
Thomas McKevitt *et al.*

Conf. No.: 5712

: Group Art Unit: 3711

Appln. No.: 10/720,573

: Examiner: Mark S. Graham

Filing Date: November 24, 2003

: Attorney Docket No.: 9249-55U1

Title: Pool Cue Weighting System

**AFTER FINAL REQUEST FOR CONTINUED EXAMINATION
UNDER 37 C.F.R. § 1.114**

This is a Request for Continued Examination (RCE) Under 37 C.F.R. § 1.114 of the above identified application in response to the Office Action, mailed February 2, 2005. Enclosed are the following in support of the RCE under 37 C.F.R. § 1.114:

- ☐ Enter the unentered Amendment previously filed on &@ under 37 C.F.R. § 1.116 in the above application.
- ☒ An Amendment.
- ☐ An Information Disclosure Statement, PTO/SB/08A and cited references.
- ☐ New formal drawings.
- ☐ A Petition for Extension of Time to &@ for the pending application.
- ☐ Other: &@

The following fees are enclosed:

- ☒ RCE fee of \$395 required under 37 C.F.R. § 1.17(e).
- ☐ Extension of time fee in the amount of \$____.00

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- ☐ Additional claim fees of &@ for excess claims submitted in the enclosed Amendment, calculated as follows:

| | | | | | SMALL ENTITY | | LARGE ENTITY | |
|------------------------------------------------------------------------|-------------------------------------------|-----|---------------------------------------|------------------|--------------|------------|--------------|------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDIT. FEE | RATE | ADDIT. FEE |
| TOTAL | 13 | (-) | or 20 | 0 | x25 | | x50 | |
| INDEP. | 7 | (-) | 7 | 0 | x100 | | x200 | |
| <input type="checkbox"/> 1st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS | | | | | +\$180 | | +\$360 | |
| | | | | | TOTAL | | TOTAL | |

- ☒ Firm check totaling \$395.00 is enclosed herewith.
- ☒ The Commissioner is hereby authorized to charge and/or credit Deposit Account No. 50-1017 (Billing No. 209249.0064) as noted below. A duplicate copy of this sheet is enclosed.
- ☒ Any overpayments or deficiencies in the above-calculated fee(s).
- ☐ RCE fee in the amount of \$____.00.
- ☐ Extension fee in the amount of \$____.00.
- ☐ Additional claim fee(s) in the amount of \$____.00 as calculated above.
- ☒ Any additional fees required under 37 C.F.R. §§ 1.16 or 1.17.
- ☒ In the event that a Petition for Extension of Time is required, but not enclosed, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS

April 28, 2005
(Date)

By:

Dennis J. Butler
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DJB/LLK:nywp
Enclosures